

**FORM  
INSP**Rev  
X/15**State of Colorado  
Oil and Gas Conservation Commission**1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

05/16/2017

Submitted Date:

05/18/2017

Document Number:

668005440**FIELD INSPECTION FORM**Loc ID 419490 Inspector Name: DURAN, JOHN On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10417Name of Operator: INCREMENTAL OIL & GAS (FLORENCE) LLCAddress: 600 17TH ST SUITE 2625 SOUTHCity: DENVER State: CO Zip: 80202**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone                     | Email                          | Comment                         |
|--------------|---------------------------|--------------------------------|---------------------------------|
| Goss, Aaron  | 303-233-2232/303-495-0327 | AGoss@austinexploration.com    | <a href="#">All Inspections</a> |
| Harkins, Liz | 303-233-2232/719-429-4513 | Lharkins@austinexploration.com | <a href="#">All Inspections</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name       | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------------|-------------|
| 419492      | WELL | PR     | 05/17/2012  | OW         | 043-06198 | GREENBACK 33-29-ST1 | PR          |

**General Comment:**

**Location**Overall Good: ☒

|                      |   |       |  |
|----------------------|---|-------|--|
| <b>Signs/Marker:</b> |   |       |  |
| Type                 | WELLHEAD  |       |  |
| Comment:             | Lease sign has been updated with current operator and new contact number. |       |  |
| Corrective Action:   |   | Date: |  |
| Type                 | TANK LABELS/PLACARDS  |       |  |
| Comment:             |   |       |  |
| Corrective Action:   |   | Date: |  |

Emergency Contact Number:

Comment: 303-495-0327/719-429-4513

Corrective Action:

Date: \_\_\_\_\_

Overall Good: ☒

|                |      |        |  |
|----------------|------|--------|--|
| <b>Spills:</b> |      |        |  |
| Type           | Area | Volume |  |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

|                    |           |       |  |
|--------------------|-----------|-------|--|
| <b>Fencing/:</b>   |           |       |  |
| Type               | PUMP JACK |       |  |
| Comment:           |           |       |  |
| Corrective Action: |           | Date: |  |
| Type               | LOCATION  |       |  |
| Comment:           |           |       |  |
| Corrective Action: |           | Date: |  |

|                           |                |       |                 |
|---------------------------|----------------|-------|-----------------|
| <b>Equipment:</b>         |                |       | corrective date |
| Type: Pump Jack           | # 1            |       |                 |
| Comment:                  |                |       |                 |
| Corrective Action:        |                | Date: |                 |
| Type: Deadman # & Marked  | # 4            |       |                 |
| Comment:                  |                |       |                 |
| Corrective Action:        |                | Date: |                 |
| Type: Ancillary equipment | # 1            |       |                 |
| Comment:                  | Electrical box |       |                 |
| Corrective Action:        |                | Date: |                 |

**Tanks and Berms:**

|           |   |          |                |         |        |
|-----------|---|----------|----------------|---------|--------|
| Contents  | # | Capacity | Type           | Tank ID | SE GPS |
| CRUDE OIL | 1 | 300 BBLS | FIBERGLASS AST |         | ,      |
| Comment:  |   |          |                |         |        |

|                    |          |                     |                     |             |       |
|--------------------|----------|---------------------|---------------------|-------------|-------|
| Corrective Action: |          |                     |                     | Date:       |       |
| <b>Paint</b>       |          |                     |                     |             |       |
| Condition          |          |                     |                     |             |       |
| Other (Content)    |          |                     |                     |             |       |
| Other (Capacity)   |          |                     |                     |             |       |
| Other (Type)       |          |                     |                     |             |       |
| <b>Berms</b>       |          |                     |                     |             |       |
| Type               | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |       |
| Earth              | Adequate | Walls Sufficient    | Base Sufficient     | Adequate    |       |
| Comment:           |          |                     |                     |             |       |
| Corrective Action: |          |                     |                     |             | Date: |
| <b>Venting:</b>    |          |                     |                     |             |       |
| Yes/No             |          |                     |                     |             |       |
| Comment:           |          |                     |                     |             |       |
| Corrective Action: |          |                     |                     |             | Date: |
| <b>Flaring:</b>    |          |                     |                     |             |       |
| Type               |          |                     |                     |             |       |
| Comment:           |          |                     |                     |             |       |
| Corrective Action: |          |                     |                     |             | Date: |

|                             |            |                       |            |                  |
|-----------------------------|------------|-----------------------|------------|------------------|
| <b>Inspected Facilities</b> |            |                       |            |                  |
| Facility ID: 419492         | Type: WELL | API Number: 043-06198 | Status: PR | Insp. Status: PR |
| <b>Producing Well</b>       |            |                       |            |                  |
| Comment:                    | PR         |                       |            |                  |
| Corrective Action:          |            |                       |            | Date:            |

|  |
|--|
|  |
|--|

**Reclamation - Storm Water - Pit****Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel           | Pass            | Gravel                  | Pass                  |               |                          |         |

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description          | URL   |
|--------------|----------------------|---|
| 401292604    | INSPECTION SUBMITTED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4155282">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4155282</a> |